

Massachusetts Department of Environmental Protection Bureau of Resource Protection – Drinking Water Program

UIC Class V Well Pre-Closure Notification Form Instructions and Supporting Materials

This Form MUST be submitted and received by DEP Thirty (30) prior to any UIC well closure

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Introduction

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at <u>mass.gov/dep</u> in two file formats: Microsoft Word™ and Adobe Acrobat PDF™. Either format allows documents to be printed.

Instructions & Support Materials files in Microsoft Word™ format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

Permit Applications in Microsoft Word[™] format must be downloaded separately. Users with Microsoft Word[™] 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF™ format combine *Permit Applications* and *Instructions* & *Support Materials* in a single document. Adobe Acrobat PDF™ files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.

You must complete this form to notify MA DEP that you intend to close a Underground Injection control (UIC) Class V well(s) at your facility. You may complete one form for more than one of the same type of Class V wells at each facility. For example, if you will be closing two drywells that are of similar construction at your facility and receive discharges from the same activity (see Well Codes in the table below), you may use one form.

- **A.** Supply the name and street address of the facility where the Class V well(s) is located. Include the City/Town, State (U.S.) Postal Service abbreviation) and Zip Code. If there is no street address for the Class V well, provide the route number or locate the well(s) on a map. If available, for the "Location" provide the Latitude/Longitude of the well or the legal description of the facility.
- **B.** Provide the name and mailing address of the owner of the facility or if the facility is operated by lease, the operator of the facility. Include the name and phone number of the legal contact for any questions regarding the information provided.
- **C.** Indicated the Type, Code and Number of Class V injection well(s) that you intend to close. For example, motor vehicle waste disposal well or cesspool. Provide the number of wells of this well type at your location that will be closed. [See Table below]

Mark an "X" in the appropriate box to indicate the type of well construction. Mark all that apply to your situation. For example, for a septic tank that drains into a drywell, mark both the "septic tank" and "drywell" boxes. Please provide a generalized sketch or schematic of the well construction.

List or describe the types of fluids that enter the Class V well. If available or required attach a copy of the chemical analysis results and/or the Material Safety Data Sheets for the fluids that enter the well.



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Estimate the average daily flow into the well in gallons per day.

D. Mark an "X" in the appropriate box(s) to indicate briefly how the well closure is expected to proceed. Mark all that apply to your situation. For example, all the boxes except the "Remove well & any contaminated soil" and "Other" would be marked if the connection of an automotive service bay drain leading to a septic tank and drainfield will be closed, but the septic system will continue to be used for washroom waste disposal only, and the fluids and sludge throughout the system will be removed for proper disposal, the system cleaned, a cement plug placed in the service bay drain and the pipe leading to the washroom, connection, and the septic tank/drainfield remains open for septic use only. In this example, the motor vehicle waste disposal well is being converted to another well type (a septic system).

The purpose of this form is to serve as the means for the Class V well owner or operator's notice to the UIC Coordinator of their intent to close the well in accordance with Title 40 of the Code of Federal Regulations (40 CFR) Section 144.12 (a). According to 40 CFR § 144.86, you must notify the UIC Program Coordinator at least 30 days prior to well closure of your intent to close and abandon your well. Upon receipt of this form, if the UIC Coordinator determines that more specific information is required to be submitted to ensure that the well closure will be conducted in a manner that will protect underground sources of drinking water (as defined in 40 CFR § 144.3), the Director can require the owner/operator to prepare, submit and comply with a closure plan acceptable to, and approved by the Coordinator.

Please be advised that this form is intended to satisfy federal and state UIC requirements regarding Pre-closure notification only. Other state, tribal or local requirements may also apply.

Send duplicate copies of all forms to:

Local Board of Health Local Plumbing Inspector



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Name of Well Type	EPA Well Code	Name of Well Type EPA	Well Code
Agricultural Drainage Well	5F1	Storm Water Drainage Wells	5D2
Improved Sinkholes	5D3	Industrial Drainage Wells	5D4
Special Drainage Wells	5G30	Electric Power Reinjection Wells	5A5
Direct Heat Reinjection Wells	5 5A6	Heat Pump/Air Conditioning Return Flow Wells	5A7
Groundwater Aquaculture Re Flow Wells	turn 5A8	Untreated Sewage Waste Disposal Wells	5W9
Cesspools	5W10	Septic Systems (Undifferentiated)	5W11
Septic Systems (Well Disposal Method)	5W31	Septic Systems (Drainfield Disposal Method)	5W32
Domestic Wastewater Treatm Plant Effluent Disposal Wells		Mining, Sand or Other Backfill Wells	5X13
Solution Mining Wells	5X14	In-situ Fossil Fuel Recovery Wells	5X15
Spent-Brine Return Flow Wel	lls 5X16	Cooling Water Return Flow Wells	5A19
Industrial Process Water and Water Disposal Wells	5W20	Automobile Service Station Disposal Well	5X28
Aquifer Recharge Wells	5R21	Saline Water Intrusion Barrier Wells	5B22
Subsidence Control Wells	5\$23	Radioactive Waste Disposal Wells	5N24
Experimental Technology We	ells 5X25	Aquifer Remediation Related Well	s 5X26
Abandoned Drinking Water V	Vells 5X29	Other Wells	5X27

Please refer to: http://www.state.ma.us/dep/appkits/ws06.pdf for detailed information on well type



Addresses and Phone Numbers

DEP Boston One Winter Street Boston, MA 02108 Telephone: (617) 292-5500 Fax: (617) 556-1049 TDD: (617) 574-6868 William X. Wall Experiment Station 37 Shattuck Street Lawrence, MA 01843 Fax: (978) 688-0352 Division of Environmental Analysis

Telephone: (978) 682-5237 Air Quality Surveillance Telephone: (978) 975-1138 Office of Watershed Management 627 Main Street Worcester, MA 01608 Telephone: (508) 792-7470 Fax: (508) 839-3469 Training Center DEP Central Region Office 627 Main Street Worcester, MA 01608 Telephone 508-767-2880 Fax: 508-792-7621

DEP Western Region 436 Dwight Street Suite 402 Springfield, MA 01103 Phone: (413) 784-1100 Fax: (413) 784-1149 Agawam Alford Amherst Ashfield Becket Belchertown Bernardston Blandford Brimfield Buckland Charlemont Cheshire Chester Chester Chester Clarksburg

Adams

Colrain
Conway
Cummington
Dalton
Deerfield
Easthampton
East Longmeadow
Egremont
Erving
Florida
Gill
Goshen
Granby
Granville
Great Barrington
Greenfield

Hampden Hancock Hatfield Hawley Heath Hinsdale Holland Holyoke Huntington Lanesborough Lee Lenox Leverett Leyden Longmeadow Ludlow Middlefield Monroe
Montague
Monterey
Montgomery
Monson
Mount Washington
New Ashford
New Marlborough
New Salem
North Adams
NorthAmpton
Northfield
Orange
Otis
Palmer
Pelham
Peru

Pittsfield Plainfield Richmond Rowe Russell Sandisfield Savoy Sheffield Shelburne Shutesbury Southampton South Hadley Southwick Springfield Stockbridge Sunderland Tolland

Ware
Warwick
Washington
Wendell
Westfield
Westfield
West Springfield
West Stockbridge
Whately
Wilbraham
Williamsburg
Williamstown
Windsor
Worthington

Tyringham Wales

DEP Central Region 627 Main Street Worcester, MA 01608 Phone: (508) 792-7650 Fax: (508) 792-7621 TDD: (508) 767-2788



Acton
Ashburnham
Ashby
Athol
Auburn
Ayer
Barre
Bellingham
Berlin
Blackstone
Bolton
Boxborough
Boylston
Brookfield

Charlton
Clinton
Douglas
Dudley
Dunstable
East Brookfield
Fitchburg
Gardner
Grafton
Groton
Harvard
Hardwick
Holden
Hopedale

Hadley

Hopkinton Hubbardston Hudson Holliston Lancaster Leominster Littleton Lunenburg Marlborough Maynard Medway Mendon Wilford Millbury
Millville
New Braintree
Northborough
Northbridge
North Brookfield
Oakham
Oxford
Paxton
Pepperell
Petersham
Phillipston
Princeton
Royalston

Rutland Shirley Shrewsbury Southbrough Southbridge Spencer Sterling Stow Sturbridge Sutton Templeton Townsend Tyngsborough Ubton

Uxbridge Warren Webster Westborough West Boylston West Brookfield Westford Westminster Winchendon Worcester

DEP Southeast Region 20 Riverside Drive Lakeville, MA 02347 Phone: (508) 946-2700 Fax: (508) 947-6557 TDD: (508) 946-2795



Abington Acushnet Attleboro Avon Barnstable Berkley Bourne Brewster Bridgewater Brockton Carver Chatham Chilmark Dartmouth
Dennis
Dighton
Duxbury
Eastham
East Bridgewater
Easton
Edgartown
Fairhaven
Fairhaven
Falmouth
Foxborough
Franklin

Freetown Gay Head Gosnold Halifax Hanover Hanson Harwich Kingston Lakeville Mansfield Marion Marshfield Mashpee Mattapoisett
Middleborough
Nantucket
New Bedford
North Attleborough
Norton
Norwell
Oak Bluffs
Orleans
Pembroke
Plainville
Plymouth
Plympton

Provincetown Raynham Rehoboth Rochester Rockland Sandwich Scituate Seekonk Sharon Somerset Stoughton Swansea Taunton Tisbury
Truro
Wareham
Wellfleet
West Bridgewater
Westport
West Tisbury
Whitman
Wrentham
Yarmouth

DEP Northeast Region One Winter Street Boston, MA 02108 Phone: (617) 654-6500 Fax: 617-292-5850 TDD (617) 574-6868



Amesbury Andover Arlington Ashland Bedford Belmont Beverly Billerica Boston Boxford Braintree Brookline Burlington Cambridge Canton Carlisle Chelmsford Chelsea Cohasset Concord Danvers Dedham Dover Dracut Essex Everett Framingham Georgetown Gloucester Groveland

Haverhill

Hingham
Holbrook
Hull
Ipswich
Lawrence
Lexington
Lincoln
Lowell
Lynn
Lynnfield
Malden
Manchester-By-The-Sea
Marblehead

Melrose

Merrimac Methuen Middleton Millis Milton Nahant Natick Needham Newbury Newburyport Newton Norfolk North Andover North Reading Norwood Peabody

Quincy Randolph Reading Revere Rockport Rowley Salem Salisbury Saugus Sherborn Somerville Stoneham Sudbury Swampscott Tewksbury Topsfield

Wakefield
Walpole
Waltham
Watertown
Wayland
Wellesley
Wenham
West Newbury
Weston
Westwood
Weymouth
Wilmington
Winchester
Winthrop
Woburn



Bureau of Resource Protection – Drinking Water Program

UIC Class V Well Pre-Closure Notification Form & Registration Form for Facilities Closing Class V Wells not Previously Registered

	ır	ansaction Type:								
		☐ Closure	Partial Clos	ure 🗌	Closure/Replace	ement				
the computer, use only the tab key to move your cursor do not use the return key.	Α.	A. Facility Information								
		Facility Name		Facility Street Address						
		Company Name (if different)	SIC Code)	Facility #	(DEP Use Only)				
		City/Town	State		Zip Code					
		County	Location:	Latitude	Location: L	ongitude				
		Facility Telephone Number (optional) Facility			E-mail (optional)					
		EPA Hazardous Waste Generator ID Number EPA Haz			ardous Waste Generator ID Number					
	В.	. Owner/Operator Information								
		Name of Owner			Address of Owner (if different than Facility)					
		City/Town			State	Zip Code				
		Name of Operator (if different than owner)			Address of Operator (if different than Facility)					
		City/Town			State					
		Legal Contact		Legal Contact Pho	one # Legal Contact Fax #					
					Vaste Generator ID Number					
		Ownership Type: Private Public	: Industrial Local Local	Commercial L Regional L	Non-Profit State	Residential Federal				
	C.	C. Injection Well Information								
			Individ	ual □ Aı	rea 🗌					
See instructions Table										
		Well Type	de	Number of Wells						
		Well Construction (check all that apply):			☐ Septic Tank ☐ Cesspool					
		☐ Improved Sinkhole ☐ Drainfield/Leachfield ☐ Dustwater - ground								
oo instructions		Other								
ee instructions Fable		Type of Discharge								
		Average Flow (gallons/day)	Year of W	ell Construction	Year	ceased using Well				



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C. Injection Well Information (continued) Number of Entry Points (EP): # EP to System before proposed closure # EP proposed to be closed # EP to System after closure* * proposed – need to be Registered with the UIC program Well Operation Status: Active Under Construction Temp. Abandoned See instructions Active/Partial Closure Permanently Abandoned/Not Reported Previously See instructions Depth to water table Depth to bedrock See instructions Soil type(s) at site- e.g. fill, sandy till, gravel, sand Distance to nearest private drinking water well See instructions Distance to the nearest Public Water Supply Name of nearest Public Water Supply D. Proposed Well Closure Activities (check all that apply): ☐ Appropriate Disposal of Remaining Fluids/Sediments Clean Out Well(s) ☐ Sample Fluids/Sediments Remove Well(s) & Any Contaminated Soil Install Permanent Plug Conversion to Other Well Type Partial Conversion to another Well Type Other (Describe) Proposed Date of Well Closure E. Affidavit I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and based on my personal knowledge or inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment.

Signature of Preparer

Printed name of Preparer

Date

Position/Title



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F. Additional Instructions

Who must register: Any party, other than those who are exempt as per 310 CMR 27.07, who discharges or has discharged to a Class V Well as defined in 310 CMR 27.00 must apply.

If you are closing the use of the well(s) for one (or more) uses but want to continue using the well(s) for one (or more) uses you must mark the top of this form Partial Closure and attach this submittal to a BRP WS 06 Form for those uses that you intend to continue to discharge to the Class V Well. The WS 06 Form (& Transmittal Form) must be submitted to the UIC Program in Boston

If you are closing the well(s) and relocating the well(s) and are planning to have the same discharge (Well Code), you must mark the top of this form Closure/Replacement and attach this submittal to a BRP WS 06 Form for the replacement well(s). The WS 06 Form (& Transmittal Form) must be submitted to the UIC Program in Boston.

Further Questions: Any questions may be directed to the UIC Program at (617) 348-4014 or Regional UIC Contact at your Regional DEP Office. Complete and sign this form, include all required attachments, and submit it to the appropriate MA DEP Regional Office:

Boston/HQ: UIC Program, DEP Boston Office, One Winter Street – 6th Floor,

Boston, MA 02108

Northeast: UIC Program, DEP Northeast Regional Office (NERO), One Winter Street – 5th

Floor, Boston, MA 02108

Southeast: UIC Program, DEP Southeast Regional Office (SERO), 20 Riverside Dr.,

Lakeville, MA 02347

Central: UIC Program, DEP Central Regional Office (CERO), 627 Main Street,

Worcester, MA 01608

Western: UIC Program, DEP Western Regional Office (WERO), State House West, 4th

Floor, 436 Dwight Street, Springfield, MA 01103

Service Center Phone Numbers:

Northeast: 617-654-6500 Southeast: 508-946-2714

Central: 508-792-7683 Western: 413-784-1100x214

Send duplicate copies of all forms to:

Local Board of Health Local Plumbing Inspector